				Document	Page 1 of 25			
Fill in	this info	ormation to identify your	r case and th	is filing:				
Debto	r 1	Sydney D Colem						
Dahta	<b>.</b> 0	First Name	Middle	Name	Last Name			
Debto (Spouse	r 2 e, if filing)	First Name	Middle	Name	Last Name			
United	States I	Bankruptcy Court for the:	NORTHER	N DISTRICT OF ILLIN	IOIS			
Case	number	19-08364						Check if this is an
					•			amended filing
Offic	cial F	orm 106A/B						
		le A/B: Prop	ertv					12/15
				n asset only once. If a	n asset fits in more than one	category, list the asse	et in the c	
informa		ore space is needed, attach			are filing together, both are top of any additional pages,			
Part 1:	Describ	oe Each Residence, Buildin	g, Land, or Oth	er Real Estate You Ow	n or Have an Interest In			
1. <b>Do</b> y	ou own o	r have any legal or equitab	le interest in a	ny residence, building,	land, or similar property?			
<b>.</b>	o. Go to F	lost O						
_		aπ 2. e is the property?						
	es. When	e is the property:						
Part 2:	Describ	e Your Vehicles						
Do yoι	ı own, le	ase, or have legal or eq	uitable intere	est in any vehicles, v	hether they are registere	d or not? Include ar	ny vehicle	es you own that
someo	ne else c	Irives. If you lease a vehic	cle, also repor	t it on Schedule G: Ex	recutory Contracts and Une	xpired Leases.		
3. Car	s, vans,	trucks, tractors, sport u	tility vehicles	s, motorcycles				
	1.							
■ Y	es							
3.1	Make:	VW	Wh	no has an interest in the	property? Check one	Do not deduct secure		•
	Model:	CC		Debtor 1 only	property condensate	the amount of any se Creditors Who Have		
	Year:	2011		Debtor 2 only		Current value of the		rrent value of the
	Approxim	nate mileage: 7	0000	Debtor 1 and Debtor 2 o	nly	entire property?		rtion you own?
г	Other info	ormation:		At least one of the debto	ors and another			
				Check if this is commu	inity property	\$8,000.0	00	\$8,000.00
				(see instructions)	inity property			· · · · · · · · · · · · · · · · · · ·
4. Wat	ercraft,	aircraft, motor homes, A	ATVs and oth	er recreational vehic	les, other vehicles, and a	ccessories		
Exai	mples: B	oats, trailers, motors, pers	sonal watercra	ft, fishing vessels, sno	owmobiles, motorcycle acco	essories		
■ N	lo							
	<b>C</b> 3							
						_		
					om Part 2, including any e			¢9 000 00
.pag	ges you	have attached for Part 2	. Write that n	umber here		=>		\$8,000.00
Part 3:	Describ	oe Your Personal and Hous	sehold Items					
		r have any legal or equi		in any of the follow	ing items?		Curr	ent value of the
		, ,			-			on you own?
								ot deduct secured is or exemptions.
a Hou	hlodası	goods and furnishings						p

Household goods and furnishings
Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Page 2 of 25 Document Case number (if known) 19-08364 Debtor 1 Sydney D Coleman Yes. Describe..... \$750.00 Personal possessions in home at liquidation value 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No ■ Yes. Describe..... \$500.00 1 tv, computer, cell phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... Personal clothing \$800.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ No Yes. Describe..... \$20.00 Costume jewelry 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,070.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured

Case 19-08364

Doc 13

Filed 04/08/19

Entered 04/08/19 17:30:42

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Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 3 of 25

Deptor 1	Sydney D Col	eman		Case number (if known) 19	-08364
					claims or exemptions.
□ No		ve in your wallet, in your ho	,	n hand when you file your petition	
				Cash	\$25.00
			ounts; certificates of deposit; shar s with the same institution, list eac	res in credit unions, brokerage house ch.	es, and other similar
_			Institution name:		
		17.1. Checking	Chase Bank		\$3,850.00
Exam <sub>i</sub> ■ No	<i>ples:</i> Bond funds, ir		okerage firms, money market acc	counts	
. Non-p	ublicly traded stoo	Institution or issuer		sinesses, including an interest in a	an LLC, partnership, and
■ No		mation about them Name of entity:		% of ownership:	
Negot Non-ri ■ No	<i>tiable instrument</i> s ir	clude personal checks, cas nts are those you cannot tra	otiable and non-negotiable inst shiers' checks, promissory notes, ansfer to someone by signing or c	and money orders.	
		Issuer name:			
	ment or pension a ples: Interests in IR		403(b), thrift savings accounts, or	other pension or profit-sharing plans	3
☐ Yes.	List each account	separately. Type of account:	Institution name:		
Yours		deposits you have made so	o that you may continue service o public utilities (electric, gas, wate	or use from a company er), telecommunications companies,	or others
_			Institution name or individ	ual:	
		Rent	Landlord		\$850.00
23. <b>Annui</b> ■ No	ties (A contract for		ey to you, either for life or for a nu	umber of years)	\$850
4. Interes	ts in an education	er name and description.  IRA, in an account in a q 9A(b), and 529(b)(1).	ualified ABLE program, or und	er a qualified state tuition prograr	n.
■ No			n. Separately file the records of a	ny interests.11 U.S.C. § 521(c):	
				e 1), and rights or powers exercisa	able for your benefit
■ No	-	mation about them	. <b>.</b>		•

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Page 4 of 25 Document Case number (if known) 19-08364 Debtor 1 Sydney D Coleman 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim.......

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

Schedule A/B: Property

\$4,725.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

35. Any financial assets you did not already list

☐ Yes. Give specific information..

■ No

Official Form 106A/B

0.00
\$0.00
ψυ.υυ
795.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$14,795.00

Fill in this info	rmation to identify your	case:			
Debtor 1	Sydney D Colema	an			
	First Name	Middle Name	Last Name	-	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number	19-08364				
(if known)					☐ Check if this is an amended filing
					amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming?	? Check one only, ever	n if yo	our spouse is filing with you.	
	■ You are claiming state and federal nonbank	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	☐ You are claiming federal exemptions. 11 t	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B			
	Personal clothing Line from Schedule A/B: 11.1	\$800.00		\$800.00	735 ILCS 5/12-1001(a)
	Line from Schedule AVB: 11.1			100% of fair market value, up to any applicable statutory limit	
	Costume jewelry Line from Schedule A/B: 12.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
	Line nom Schedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit	
	Cash Line from Schedule A/B: 16.1	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
	Line Holli Schedule AVB. 10.1			100% of fair market value, up to any applicable statutory limit	
	Checking: Chase Bank Line from Schedule A/B: 17.1	\$3,850.00		\$3,850.00	735 ILCS 5/12-1001(b)
	LITE HOTH SCHEdule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	

<ol><li>Are you claiming a homestead exemption of more than \$160</li></ol>	100,37	J
---	--------	---

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

Official Form 106C

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Schedule C: The Property You Claim as Exempt

Entered 04/08/19 17:30:42 Desc Main Case 19-08364 Doc 13 Filed 04/08/19 Document

Page 7 of 25
Case number (if known) Debtor 1 Sydney D Coleman 19-08364

		Document	Page 8	of 25		
Fill in this information to	o identify you	r case:				
Debtor 1 Svdi	ney D Colem	nan .				
First N		Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) First N	ame	Middle Name	Last Name			
United States Bankruptcy	Court for the:	NORTHERN DISTRICT OF IL	LINOIS			
Casa number 40 0036	•4					
Case number 19-0836	04				□ Chec	ck if this is an
						nded filing
000 : 15 400	<b>.</b>					
Official Form 106	_					
Schedule D: Ci	reditors	Who Have Claims	Secured	l by Propert	у	12/15
		f two married people are filing toget out, number the entries, and attach i				
I. Do any creditors have cla	ims secured by	your property?				
☐ No. Check this box	ء and submit th	is form to the court with your othe	er schedules. Yo	u have nothing else t	o report on this form.	
Yes. Fill in all of the		,		J		
		Jelow.				
Part 1: List All Secure				Column A	Column B	Column C
for each claim. If more than o	one creditor has	nore than one secured claim, list the cr a particular claim, list the other credito al order according to the creditor's nar	rs in Part 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Opportunity Fina	ancial	Describe the property that secures	the claim:	\$0.00	\$8,000.00	\$0.00
Creditor's Name		2011 VW CC 70000 miles				
11 E Adama Stra	ot Suito					
11 E Adams Stre 501	et, Suite	As of the date you file, the claim is	: Check all that			
Chicago, IL 6060	3	apply.  Contingent				
Number, Street, City, State		☐ Unliquidated				
		☐ Disputed				
Who owes the debt? Chec	ck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as	mortgage or secu	ured		
Debtor 2 only		car loan)				
☐ Debtor 1 and Debtor 2 on	ly	☐ Statutory lien (such as tax lien, me	echanic's lien)			
At least one of the debtors	s and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relate community debt	es to a	☐ Other (including a right to offset)				
Date debt was incurred		Last 4 digits of account nun	nber			
			<u> </u>			
				<u> </u>		
•		olumn A on this page. Write that num		\$	60.00	
Write that number here:	our form, add t	he dollar value totals from all pages	S.	\$	0.00	
Don't On Lint Others to F	Da Natifiad fac	o Dahi Thai Van Almadin Liata	_1		·	
		a Debt That You Already Listed				
trying to collect from you fo	or a debt you ov f the debts that	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the addition s page.	in Part 1, and th	en list the collection ag	gency here. Similarly, i	f you have more
□ N==== N	+ Oit. C: + C =	"- O-d-				
Name, Number, Stree  Markoff and Kra	-	.ip Code	On which	h line in Part 1 did you e	nter the creditor? 2.1	_
29 N Wacker #5			Last 4 di	gits of account number _	6983	

Chicago, IL 60606

		Document	Page	9 of 2	25	_		
Fill in this info	rmation to identify your cas							
Debtor 1	Sydney D Coleman							
	First Name	Middle Name	Last Name	<del></del>				
Debtor 2	- Time A	ACT III AI						
(Spouse if, filing)	First Name	Middle Name	Last Name	}				
United States B	Sankruptcy Court for the:	IORTHERN DISTRICT OF ILL	INOIS					
Case number	19-08364							
(if known)	10 00004						Check if this is an	
						a	amended filing	
Official For	m 106E/E							
		o Have Unsecured	Claim	e			12/15	
		art 1 for creditors with PRIORITY			ion oneditore with NON	IDDIODITY ala		41.40
eft. Attach the Co ame and case n		d by Property. If more space is n f you have no information to rep						
	itors have priority unsecured c							
No. Go to		iaims against you?						
Yes.	Fall 2.							
identify what possible, list	type of claim it is. If a claim has b the claims in alphabetical order a	a creditor has more than one prior oth priority and nonpriority amounts ccording to the creditor's name. If y ular claim, list the other creditors in	s, list that o ou have m	claim here a	and show both priority a	and nonpriority	amounts. As much as	,
(For an expla	nation of each type of claim, see	the instructions for this form in the	instruction	booklet.)	Total claim	Priority	Nonpriority	
					Total Claim	amount	amount	
	Department of Revenue				****	400		
2.1 <b>1/15</b>	Dun ditaula Nama	Last 4 digits of accoun	t number	3992	\$908.00	\$90	08.00 \$0	.00
•	Creditor's Name uptcy Section	When was the debt inc	urred?					
	x 64338					=		
	go, IL 60664-0338	As of the date you file	the eleim	io. Ob a ala	all that and by			
	Street City State Zip Code red the debt? Check one.	As of the date you file,  Contingent	the claim	is: Check	all that apply			
■ Debtor 1		☐ Unliquidated						
Debtor 2	•	☐ Disputed						
_	and Debtor 2 only	Type of PRIORITY unse	ecured cla	ıim:				
	one of the debtors and another	☐ Domestic support ob						
	f this claim is for a community	_	_	YOU OWE the	e government			
	rthis claim is for a community is ubject to offset?	☐ Claims for death or p	-		-			
No	. outloot to onest:	Other. Specify	Croonar III	a.y willo y	Sa word intoxidated			
☐ Yes			ome Ta	xes				

Entered 04/08/19 17:30:42 Case 19-08364 Doc 13 Filed 04/08/19 Desc Main Document Page 10 of 25 Debtor 1 Sydney D Coleman ase number (if known) 19-08364 Internal Revenue Service - 1/11 2.2 Last 4 digits of account number \$16,000.00 \$16,000.00 \$0.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of **Total claim** 4.1 \$0.00 Aaron's Sales & Lease Last 4 digits of account number 705R Nonpriority Creditor's Name Attn: Bankruptcy Opened 7/19/12 Last Active Po Box 100039 When was the debt incurred? 1/04/13 Kennesaw, GA 30156 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply

☐ Contingent

■ Unliquidated

☐ Student loans

report as priority claims

■ Other. Specify Lease

Type of NONPRIORITY unsecured claim:

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Disputed

Who incurred the debt? Check one.

At least one of the debtors and another

☐ Check if this claim is for a community

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

Debtor 1 only

Debtor 2 only

debt

■ No

☐ Yes

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 11 of 25

Debtor 1 Sydney D Coleman ase number (if known) 19-08364 4.2 Acme Contl Credit Unio Last 4 digits of account number 0000 \$8,706.00 Nonpriority Creditor's Name Opened 01/14 Last Active 13601 S Perry When was the debt incurred? 8/29/18 Riverdale, IL 60627 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Automobile ☐ Yes 4.3 **Asset Recovery Solutions** Last 4 digits of account number 1905 \$458.00 Nonpriority Creditor's Name When was the debt incurred? 2200 E Devon Ave, Ste 200 Des Plaines, IL 60018 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Capital 4.4 **Capital One** Last 4 digits of account number 2878 \$51.00 Nonpriority Creditor's Name Opened 12/23/15 Last Active Attn: Bankruptcy Po Box 30285 When was the debt incurred? 11/08/18 Salt Lake City, UT 84130 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 12 of 25

Case number (# known) 19-08364

Debtor	1 Sydney D Coleman		Case number (if known) 19-08364		
4.5	City of Chicago	Last 4 digits of account number		\$6,500.00	
	Nonpriority Creditor's Name  Department of Revenue  PO Box 88292  Chicago II 60690	When was the debt incurred?			
	Chicago, IL 60680  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify			
4.6	Comenity Bank/Ashley Stewart Nonpriority Creditor's Name	Last 4 digits of account number	3501	\$633.00	
	Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 9/29/15 Last Active 1/18/19		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	-			
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts		
	□ Yes	Other Specify Charge Acc	count		
4.7	Comenity Bank/Carsons	Last 4 digits of account number	1619	\$489.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus OH 42218	When was the debt incurred?	Opened 7/21/16 Last Active 1/28/19		
	Columbus, OH 43218  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
	■ No	Debts to pension or profit-sharir			
	Yes	■ Other. Specify Charge Account			

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 13 of 25

Debtor 1 Sydney D Coleman ase number (if known) 19-08364 4.8 Comenity Bank/Lane Bryant Last 4 digits of account number 4150 \$483.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 7/20/16 Last Active Po Box 182125 When was the debt incurred? 1/15/19 Columbus, OH 43218 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.9 **Convergent Outsourcing** Last 4 digits of account number 0625 \$836.00 Nonpriority Creditor's Name 800 SW 39th St When was the debt incurred? PO Box 9004 Renton, WA 98057 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify **T Mobile** 4.1 Dept of Ed / Navient 0928 \$85,278.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 09/16 Last Active Po Box 9635 When was the debt incurred? 2/28/19 Wilkes Barr, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No lacksquare Debts to pension or profit-sharing plans, and other similar debts T Yes Other. Specify Educational

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 14 of 25

Debtor 1 Sydney D Coleman Case number (if known) 19-08364 4.1 Dept of Ed / Navient 0123 \$6,674.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 01/17 Last Active When was the debt incurred? 2/28/19 Po Box 9635 Wilkes Barr, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational 4.1 2 \$855.00 Dept of Ed / Navient 0503 Last 4 digits of account number Nonpriority Creditor's Name Attn: Claims Dept Opened 05/17 Last Active Po Box 9635 When was the debt incurred? 2/28/19 Wilkes Barr, PA 18773 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Educational DeVrry Inc/Adtalem Global 4.1 9920 \$0.00 3 Education Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/12 Last Active 3005 Highland Parkway When was the debt incurred? 9/28/16 **Downers Grove, IL 60515** Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed ☐ Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\square$  Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

Educational

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 15 of 25

Debtor 1 Sydney D Coleman ase number (if known) 19-08364 4.1 **Illinois Collection Service** 5291 \$160.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 1010 Tinley Park, IL 60487 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Illinois Collection Service** 1363 Last 4 digits of account number \$200.00 5 Nonpriority Creditor's Name PO Box 1010 When was the debt incurred? Tinley Park, IL 60487 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Keynote Consulting, Inc. 3701 \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name 220 West Campus Drive When was the debt incurred? Opened 3/22/17 Suite 102 Arlington Heights, IL 60004 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Northwestern** ☐ Yes ■ Other. Specify Obstetrics And Gy

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 16 of 25 Case number (if known) 19-08364

Sydney D Coleman		13-06364	
Linebarger Goggan Blair	Last 4 digits of account number		\$1,162.00
Nonpriority Creditor's Name PO Box 06140	When was the debt incurred?		
Chicago, IL 60606  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		
Opportunity Financial, LLC	Last 4 digits of account number	0477	\$7,000.00
Nonpriority Creditor's Name  130 East Randolph Street		Opened 12/22/16 Last Active	
Suite 3400	When was the debt incurred?	3/31/17	
Chicago, IL 60601  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dam	13. Official and apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify Unsecured	<u> </u>	
Progressive CU	Lock A digita of account mumber		Unknown
Nonpriority Creditor's Name 131 West 33rd Street	Last 4 digits of account number  When was the debt incurred?		Olikilowii
New York, NY 10001	_		
Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	Other. Specify		

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 17 of 25

Case number (# known) 19-08364

Debt	or 1 Sydney D Coleman		Case number (if known) 19-08364			
4.2 0	Regional Recovery Services, Inc.	Last 4 digits of account number	0074	\$318.00		
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred?	Opened 01/18			
	Po Box 3333 Munster, IN 46321 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	_				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Collection	Attorney Nwi Urgent Care			
4.2	Regional Recovery Services, Inc.	Last 4 digits of account number	0073	\$192.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3333	When was the debt incurred?	Opened 01/18			
	Munster, IN 46321	_				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Collection	Attorney Nwi Urgent Care			
4.2	Transworld Systems Inc	Last 4 digits of account number	0315	\$36.00		
	Nonpriority Creditor's Name 1105 Schrock Rd, Ste 300 Columbus, OH 43229	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure				
	☐ Check if this claim is for a community debt	Student loans				
	Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify				

	Ouc	JC <u> </u>	0 00004	Document Dage	18 of	5 7 E	,O, 10 11.	00.42 DC0	O IVICIII
Debtor	1 Sydne	ey D	Coleman	Document Page	Case	e numb	oer (if known)	19-08364	
4.2									
3	Village of	of Ev	ergreen Park	Last 4 digits of account numb	er oR	RD2		_	\$200.00
	Nonpriority			When was the debt incurred?					
	PO Box		i n, IL 60197	when was the debt incurred?					
			ty State Zip Code	As of the date you file, the cla	im is: Ch	heck all	that apply		
			e debt? Check one.	7.5 5. 1.10 auto you, 1.10 o.u.			indiappi)		
	■ Debtor	1 only		☐ Contingent					
	☐ Debtor	•		☐ Unliquidated					
	_	•	Debtor 2 only	☐ Disputed					
			f the debtors and another	Type of NONPRIORITY unsect	ured clai	im:			
				☐ Student loans					
	debt	ir this	claim is for a community	☐ Obligations arising out of a s	enaration	n aaree	ment or divorc	e that you did not	
		m subj	ject to offset?	report as priority claims	eparation	ii agree	intent of divorc	e that you did not	
	■ No			Debts to pension or profit-sh	aring pla	ıns, and	other similar of	debts	
	☐ Yes			Other. Specify					
				— Other. Specify					
Part 3:	List Of	hers	to Re Notified About a D	ebt That You Already Listed					
				about your bankruptcy, for a debt th	at vou a	Iroady	lietad in Darte	1 or 2 For avample	if a collection agency
is tryir	ng to collec	ct from	you for a debt you owe to s	someone else, list the original credito at you listed in Parts 1 or 2, list the a	or in Part	ts 1 or 2	2, then list the	collection agency	here. Similarly, if you
notifie	d for any d	lebts i	n Parts 1 or 2, do not fill out	• •					
	nd Address	EDE	CTEIN	On which entry in Part 1 or Part 2 did					
	V MONTI		-					rity Unsecured Clain	
	go, IL 60		_	Part 2: Creditors with Nonpriority Unsecured Claims					
	,			Last 4 digits of account number					
Name ar	nd Address			On which entry in Part 1 or Part 2 did	vou list th	he oriair	nal creditor?		
		ment	of Revenue 1/15	Line 2.1 of (Check one):				rity Unsecured Clain	ns
	Levy Un	it			laims				
-	x 19035	0070	•					. ,	
Spring	gfield, IL	6279	4	Last 4 digits of account number					
Part 4:	Add th	e Am	ounts for Each Type of L	Insecured Claim					
6. Total t				aims. This information is for statistic	al report	tina pu	rposes only. 2	28 U.S.C. §159. Add	the amounts for each
	f unsecure						.,,.	<b>3</b>	
							Tota	I Claim	
		6a.	Domestic support obligation	ns	6a.	١.	\$	0.00	
	otal								
from Pa	aims art 1	6b.	Taxes and certain other dek	ots you owe the government	6b.	).	\$	16,908.00	
				Il injury while you were intoxicated	6c.		\$	0.00	
		6d.	Other. Add all other priority u	nsecured claims. Write that amount here	e. 6d.	i.	\$	0.00	
						_			
		6e.	Total Priority. Add lines 6a th	nrough 6d.	6e.	e.	\$	16,908.00	
								·	
		•						I Claim	
_		6f.	Student loans		6f.		\$	92,807.00	
	īotal aims								
from Pa				separation agreement or divorce tha			\$	0.00	
			you did not report as priorit Debts to pension or profit-s	y claims haring plans, and other similar debts	6g. <b>6</b> h.		\$ 	0.00	
				- · ·				0.00	

Other. Add all other nonpriority unsecured claims. Write that amount

Total Nonpriority. Add lines 6f through 6i.

6j.

27,424.00

120,231.00

Fill in this info	ormation to identify your	case:		
Debtor 1	Sydney D Colema	an		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number	19-08364			
(if known)				

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Antoinette Hall 1333 W 98th St Chicago, IL 60643 Apartment lease \$1,000/month expires Jan 2020

		Document	Page 20 of	25	1	
Fill in this	information to identify your	case:				
Debtor 1	Sydney D Colema					
Dobtor 2	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, fili	ng) First Name	Middle Name	Last Name			
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS			
Case num	ber <b>19-08364</b>					
(if known)					_	ck if this is an nded filing
Officia	l Form 106H					
	lule H: Your Cod	obtors				42/45
Scried	iule n. Toul Cou	enroi 2				12/15
1. Do  ☐ No ☐ Yes  2. With Arizor ☐ No.	hin the last 8 years, have you na, California, Idaho, Louisiana, Go to line 3.	you are filing a joint case, do no  I lived in a community proper Nevada, New Mexico, Puerto f	t <b>y state or territory?</b> Rico, Texas, Washing	? (Community proper		itories include
L res	s. Dia your spouse, former spot	use, or legal equivalent live with	you at the time?			
in line Form	e 2 again as a codebtor only i	ors. Do not include your spou f that person is a guarantor o Form 106E/F), or Schedule G	r cosigner. Make su	ire you have listed	the creditor on S	chedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The cr Check all schedu		you owe the debt
	Lynda Coleman 1333 W 98th St, Unit 10 Chicago, IL 60643			☐ Schedule D,☐ Schedule E/F☐ Schedule G	<sup>-</sup> , line	

## Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 21 of 25

<b>5</b> 111 1	n this information to identify your c	200:					
	tor 1 Sydney D C						
	tor 2						
Unit	ed States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS				
Of Sc	ficial Form 106l chedule I: Your Inc s complete and accurate as pos		nle are filing together	(Debtor 1 ar	Check if this is:  An amended filing A supplement showing postpetition ch 13 income as of the following date:  MM / DD/ YYYY		
supp spou	olying correct information. If you use. If you are separated and you had a separate sheet to this form.	are married and not filing wi	ng jointly, and your sp ith you, do not include	oouse is livin e information	g with you, incl about your sp	ude information about yo ouse. If more space is nee	ur eded,
1.	Fill in your employment information.		Debtor 1		Debtor 2	2 or non-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed □ Not employed		☐ Employed ☐ Not employed		
	employers.  Include part-time, seasonal, or self-employed work.	Occupation Employer's name	Customer Service ComEd	e Rep			
	Occupation may include student or homemaker, if it applies.	Employer's address	PO Box 4647 Chicago, IL 60686	0			
		How long employed to	here? 1 months	s			_
Part	2: Give Details About Mor	nthly Income					
	nate monthly income as of the d se unless you are separated.	ate you file this form. If y	you have nothing to rep	oort for any lin	e, write \$0 in the	space. Include your non-fil	ing
	or your non-filing spouse have me space, attach a separate sheet to		ombine the information	for all employ	ers for that perso	on on the lines below. If you	need
				F	For Debtor 1	For Debtor 2 or non-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2. \$_	5,583.50	\$ <b>N/A</b> _	
3.	Estimate and list monthly overt	ime pay.		3. +\$_	0.00	+\$ <b>N/A</b>	

5,583.50

\$

N/A

4. Calculate gross Income. Add line 2 + line 3.

# Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 22 of 25

Deb	tor 1	Sydney D Coleman	-	(	Case	number (if known)	19-08	364		
	0	ve Pero Albana	4			Debtor 1	non	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$_	5,583.50	. \$_		N/A	<u>\</u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	58	ā.	\$	1,258.83	\$		N/A	\
	5b.	Mandatory contributions for retirement plans	5b	ο.	\$	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	. \$		N/A	
	5d.	Required repayments of retirement fund loans	50		\$_	0.00	·		N/A	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f		\$_ \$	0.00	\$ \$		N/A N/A	
	5g.	Union dues	5 <u>0</u>		<b>\$</b> -	0.00	· \$		N/A	_
	5h.	Other deductions. Specify:	_	).+	<b>\$</b> -	0.00			N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,258.83	\$		N/A	<del>_</del>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,324.67	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b	ο.	\$_	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.00	\$		N/A	
	8d.	Unemployment compensation	80		\$_	0.00	\$		N/A	_
	8e.	Social Security	86	€.	\$_	0.00	. \$		N/A	<u>\</u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	e 8f		\$	0.00	\$		N/A	_
	8g.	Pension or retirement income	80		\$_	0.00	\$		N/A	_
	8h.	Other monthly income. Specify: SSI	_ 8r _	1.+	\$_	1,100.00	. + \$		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	5	\$	1,100.00	\$		N/	Ά
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		5,424.67 + \$		N/A	= \$	5,424.67
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		3,424.07		13/7	-  <sup>•</sup> -	3,727.07
11.	State Included the other of the	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not cify:	depe					chedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certailies						12.	\$	5,424.67
13.	Do	you expect an increase or decrease within the year after you file this form	?					ı	Combi	ined Ily income
		No.								
		Voc Evoloin:								

Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 23 of 25

						•		
Fill	in this informa	ition to identify yo	our case:					
Deb	tor 1	Sydney D Co	oleman			Che	ck if this is:	
Dah	tor 0						An amended filing	of a management of the contraction
	tor 2 ouse, if filing)						13 expenses as of	wing postpetition chapter the following date:
Unit	ed States Banki	runtey Court for the	· NORTH	IERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
			1101111	IERRO DIOTRIOTO I IEER			WINNI / BB / TTTT	
1	e number 19 nown)	9-08364						
Of	fficial Fo	rm 106J				•		
		J: Your	Exper	ises				12/1
Be info	as complete a ormation. If m nber (if know	and accurate as lore space is ne n). Answer eve	s possible eded, atta ry questio	If two married people ar ch another sheet to this				or supplying correct
Par 1.	t 1: Descr Is this a joir	ribe Your House nt case?	ehold					
	■ No. Go to	line 2.	in a separ	ate household?				
	33. 2 33							
		-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	otor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Mother		67	Yes
								□ No
					-			☐ Yes
								□ No □ Yes
								☐ Yes
								☐ Yes
3.	Do your exp	oenses include	_	No			_	LI Tes
		f people other t d your depende	:han 👝	Yes				
Par		ate Your Ongoi		y Expenses uptcy filing date unless y	ou are using this f	orm as a si	innlement in a Cha	anter 13 case to report
exp				y is filed. If this is a supp				
the	value of sucl	h assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	ansas
(On	ficial Form 10	J6I.)					Tour exp	C113C3
4.		or home owners and any rent for th		ses for your residence. I r lot.	nclude first mortgag	e 4. \$	\$	1,000.00
	If not include	led in line 4:						
	4a. Real e	estate taxes				4a. \$	\$	0.00
		rty, homeowner'	s, or renter	's insurance		4b.		0.00
	4c. Home	maintenance, re	epair, and ι	ıpkeep expenses		4c. \$	\$	30.00
_		owner's associa				4d.	·	0.00
5	Additional r	mortagae ngum	onte tor w	nur residence such as ho	ma aquity lagge	5		0.00

## Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 24 of 25

6b. Water, sewer, garbage collection         6b. \$           6c. Telephone, cell phone, Internet, satellite, and cable services         6c. \$           6d. Other. Specify:         6d. \$           7. Food and housekeeping supplies         7. \$         45           8. Childcare and children's education costs         8. \$           9. Clothing, laundry, and dry cleaning         9. \$         6           10. Personal care products and services         10. \$         22           11. Medical and dental expenses         11. \$         9           12. Transportation. Include gas, maintenance, bus or train fare.         12. \$         2           12. Installation child substance or religious donations         13. \$         14. \$         9           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13. \$         14. \$         9           14. Charitable contributions and religious donations         14. \$         9         9           15. Insurance.         15b. \$         15         15c. Insurance         15a. \$         15a. \$           15b. Health insurance         15b. \$         15c. \$         15         15c. \$         15           15b. Health insurance. Specify:         15c. Vehicle insurance. Specify:         15c. \$         15         15         15c. \$         15c. \$ <th></th>	
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6d. Other. Specify:  Food and housekeeping supplies  Childcare and children's education costs  Children supports education costs  Children supports  Children's education costs  Children's education	0.00
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Specify: 19.  Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20a. \$  20b. Real estate taxes 20b. \$  20c. Property, homeowner's, or renter's insurance 20c. \$  20d. Maintenance, repair, and upkeep expenses 20d. \$  20e. Homeowner's association or condominium dues 20e. \$  Other: Specify: Full time nurse for mother 21. +\$ 1,95  Medical supplies for mother +\$ 20  Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 5,334.	0.00
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. Substitute of the form of the second	<u> </u>
20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. The full time nurse for mother 21. Homeowner's expecify:  Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 5,334.	
20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. S  Other: Specify: Full time nurse for mother 4 1,95  Medical supplies for mother 21. +\$ 1,95  Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 5,334.	0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues  20d. \$  20e. \$  20e. \$  Colter: Specify: Full time nurse for mother  21. +\$  Medical supplies for mother  22. Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 5,334.	0.00
20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. S  Other: Specify: Full time nurse for mother  Medical supplies for mother  Calculate your monthly expenses 22a. Add lines 4 through 21. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses.  20d. \$  1,95  21. +\$ 1,95  26  27  28  5,334.	0.00
20e. Homeowner's association or condominium dues  Other: Specify: Full time nurse for mother  Medical supplies for mother  Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.	0.00
Medical supplies for mother  Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.	0.00
Medical supplies for mother +\$ 20  Calculate your monthly expenses 22a. Add lines 4 through 21. \$ 5,334. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 22c. Add line 22a and 22b. The result is your monthly expenses. \$ 5,334.	
Calculate your monthly expenses  22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 5,334.	
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22a. Add lines 4 through 21.  22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 5,334.	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2  22c. Add line 22a and 22b. The result is your monthly expenses.  \$ 5,334.	00
22c. Add line 22a and 22b. The result is your monthly expenses.	
Calculate your monthly net income.	<u> </u>
23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 5,42	24.67
	34.00
23c. Subtract your monthly expenses from your monthly income.	
The result is your monthly net income.	0.67
Do you expect an increase or decrease in your expenses within the year after you file this form?  For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease becomodification to the terms of your mortgage?	ause of a
■ No.	
☐ Yes. Explain here:	

### Case 19-08364 Doc 13 Filed 04/08/19 Entered 04/08/19 17:30:42 Desc Main Document Page 25 of 25

Fill in this i	nformation to identify your	case:			
Debtor 1	Sydney D Colema	an			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	j) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number (if known)	er <b>19-08364</b>				☐ Check if this is an amended filing
Official F	Form 106Dec				
Decla	ration About a	n Individual	<b>Debtor's Sc</b>	hedules	12/15
obtaining m		n connection with a bank			nent, concealing property, or , or imprisonment for up to 20
Did yo	u pay or agree to pay some	one who is NOT an attor	ney to help you fill out b	pankruptcy forms?	
■ N	0				
□ Y	es. Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
that the	penalty of perjury, I declare ey are true and correct. Sydney D Coleman	that I have read the sum	x		n and
	dney D Coleman Inature of Debtor 1		Signature of	Debtor 2	

Date \_

Date April 8, 2019